Clinical Observation

The Therapeutic Effects of Electrical Acupuncture and Auricular-Plaster in 32 Cases of Chronic Fatigue Syndrome

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Objective: To observe the therapeutic effects of electrical acupuncture and auricular-plaster therapy for chronic fatigue syndrome (CFS). Method: 64 CFS patients were randomly divided into two groups. 32 cases in the treatment group were treated by the electrical acupuncture and auricular-plaster therapy, and 32 cases in the control group with oral hydrocortisone. Results: The total effective rates were respectively 93.75% in the treatment group and 75.00% in the control group, with a statistically significant difference between the two groups (P < 0.05). Conclusion: Electrical acupuncture and auricular-plaster therapy may show a better anti-fatigue effect than that of routine Western drugs.

Chronic fatigue syndrome (CFS) is mainly characterized by a long-term fatigue with such symptoms as sustained fatigue, insomnia, distraction, systemic pain and low fever, all of which may seriously affect the health and daily life of the patients. With the methods of electric needling and auricular-plaster, the authors achieved satisfactory therapeutic results in the treatment of CFS from April 2002 to June 2004. A report follows.

General Data

All the 64 cases in this series were outpatients from the First Hospital Affiliated to Guangzhou University of Traditional Chinese Medicine. They were randomly divided into two groups. Among the 32 cases in the treatment group were 19 males and 13 females, aged 21-60 years, with their illness course ranging from 8 months to 16 years. Among the 32 cases in the control group were 17 males and 15 females, aged 20-62 years, with their illness course ranging from 1 to 15 years. The general data were comparable with no obvious statistical difference between the two groups (P>0.05).

The diagnostic criteria described in The Doctor's

Guide to Chronic Fatigue Syndrome were adopted.¹ And the following morbid conditions were excluded: 1) chronic fatigue caused by dysfunction of thyroid gland, insomnia, hepatitis B, adverse reaction of drugs, mental depression, schizophrenia, delusion, dementia, nervous anorexia or nervous polyphagia; 2) bad habits such as smoking and excessive drinking for 2 years, and serious obesity with the stature index >45.

Methods of Treatment

1. Electrical acupuncture and auricular-plaster therapy were used in the treatment group. The main acupuncture points were Huatuojiaji (EX-B2) from T_1 to L_5 . Sishencong (EX-HN1) was selected for mental fatigue, and Zusanli (ST 36) and Qihai (CV 6) were added for physical fatigue. 8-10 of the above points were used each time. The No.28 filiform needles, 1.5 *cun* in length, were obliquely inserted (45°) into the Thoracic Huatuojiaji Points, and vertically inserted into the Lumbar Huatuojiaji and other points. The needles were then connected to the 6805-G electric stimulator (produced by Xingsheng Company in Qingdao of China) for 30 minutes, once a day. After treatment with electrical

acupuncture, auricular-plaster therapy was performed at the main points of Shenmen, Sympathetic and Subcortex and at the adjunct points of Heart, Liver, Spleen, Lung and Kidney. All the main points should be taken each time with 2-3 adjunct points selected. After that, the patients were asked to press the points themselves, 5 minutes each time, 3 times a day respectively in the morning, at noon and in the evening for 10 days as one treatment course. The treatment was carried out for 3 treatment courses with a 3-day interval between courses.

2. In the control group, patients were orally given hydrocortisone once a day in the morning for 10 days as one treatment course. Altogether 3 courses of treatment were provided with a daily dosage of 5mg in the first course, 2.5mg in the second course and 1.25mg in the third course.

Criteria for Therapeutic Effects

Clinically cured: No symptoms at rest, or no or slight symptoms after movement, with normal ability for work and study and the Bell's score \geq 90. Markedly effective: The symptoms obviously improved, with no or mild symptoms at rest which were aggravated after physical labour, and the Bell's score \geq 60. Improved: The symptoms improved, with moderate symptoms at rest which were obviously aggravated after physical labour, and the Bell's score \geq 40. Failed: No improvement of the symptoms, with the Bell's score \leq 30.

Results of Treatment

As shown in Table 1, the total effective rate was 93.75% in the treatment group and 75.00% in the control group, with a significant difference between the 2 groups ($\chi^2 = 4.27$, *P*<0.05).

Table 1. Comparison of the therapeutic effects between the two groups

Group	n	Cured	Markedly Effective	Improved	Failed	Total Effective rate
Treatment	32	8(25.0%)	19(59.4%)	3(9.4%)	2(6.3%)	93.7%*
Control	32	5(15.6%)	15(46.9%)	4(12.8%)	8(25.0%)	75.0%

*P < 0.05 as compared to the datum in the control group.

Discussion

At present, it is generally acknowledged that CFS with the pathogenesis uncertain is probably related to impairment or dysfunction of the cerebral nervous, endocrine, immune and motor systems induced by viral infection. In TCM, CFS belongs to the consumptive disease involving many internal organs and systems due to heavy mental and physical labours, excessive emotional stimulation and certain bad habits.

In clinic, CFS often presents itself as the deficiency syndrome. So, electrical acupuncture at the main points of Huatuojiaji as well as the other adjunct points was adopted for stimulating *qi* in the Urinary Bladder Channel and the Governor Channel, and regulating the cerebral function. Sishencong was used for irritability, dizziness and insomnia caused by mental fatigue. Zusanli and Qihai were selected for replenishing the primordial *qi* and regulating the internal organs. In addition, the auricular points closely linked with the internal organs and channels were used for strengthening the stimulation to the nervous system and the internal organs so as to regulate potential homeostasis of the body. The combined treatment by electrical acupuncture and auricular- plaster therapy can balance *yin* with *yang*, strengthen the function of internal organs, thus bring CFS under control.

References

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